Approved for use through 7/31/2006. OMB 0651-0032 U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number PATENT APPLICATION FEE DETERMINATION RECORD Application or Docket Number Substitute for Form PTO-875 448185 CLAIMS AS FILED - PART I OTHER THAN (Column 1) (Column 2) SMALL ENTITY OR SMALL ENTITY FOR NUMBER FILED NUMBER EXTRA RATE FEE RATE FEE BASIC FEE (37 CFR 1.16(a)) OR TOTAL CLAIMS (37 CFR 1.16(c)) minus 20 = OR INDEPENDENT CLAIMS (37 CFR 1.16(b)) minus 3 X \$ OR X \$ MULTIPLE DEPENDENT CLAIM PRESENT (37 CFR 1.16(d)) OR * If the difference in column 1 is less than zero, enter "0" in column 2. TOTAL OR TOTAL CLAIMS AS AMENDED - PART II OTHER THAN ~K~09 OR (Column 1) (Column 2) (Column 3) SMALL ENTITY SMALL ENTITY CLAIMS HIGHEST ⋖ REMAINING PRESENT NUMBER RATE ADDI-RATE ADDI-ENT **AFTER PREVIOUSLY EXTRA** TIONAL TIONAL AMENDMENT PAID FOR FEE FEE Total ENDMI Minus (37 CFR 1.16(c)) OR X S Independent (37 CFR 1.16(b)) Minus OR X \$ FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(d)) OR + 5 TOTAL TOTAL ADD'L FEE OR ADD'L FEE -04 (Column 1) (Column 2) (Column 3) CLAIMS HIGHEST ш REMAINING NUMBER PRESENT RATE ADDI-RATE ADDI-ENT AFTER PREVIOUSLY **EXTRA** TIONAL FEE TIONAL AMENDMENT PAID FOR FEE Total (37 CFR 1.16(c) ENDM Minus OR X S Minus = X \$ OR FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(d)) OR TOTAL TOTAL ADD'L FEE OR ADD'I FEF (Column 1) (Column 2) (Column 3) CLAIMS HIGHEST \circ REMAINING NUMBER PRESENT RATE ADDI-RATE ADDI-ENDMENT **AFTER EXTRA** PREVIOUSI Y TIONAL TIONAL AMENDMENT PAID FOR FEE FEE Total Minus (37 CFR 1.16(c)) X \$ OR Independent (37 CFR 1.16(b)) Minus X \$ OR X \$ ¥Χ FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(d)) OR TOTAL TOTAL

This collection of information is required by 37 CFR 1.16. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete,

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ADD'L FEE

OR

ADD'L FEE

If the entry in column 1 is less than the entry in column 2, write "0" in column 3.

^{**} If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20".

[&]quot;If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3".

The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.

PATENT APPLICATION FEE DETERMINATION RECORD Effective November 10, 1998 **CLAIMS AS FILED - PART I** SMALL ENTITY **OTHER THAN** (Column 1) (Column 2) TYPE . **SMALL ENTITY** OR **FOR** NUMBER FILED **NUMBER EXTRA** RATE FEE RATE FEE **BASIC FEE** 380.00 760.00 OR **TOTAL CLAIMS** minus 20= X\$ 9= X\$18= OR INDEPENDENT CLAIMS minus 3 = X39= X78= OR MULTIPLE DEPENDENT CLAIM PRESENT +130= +260= OR * If the difference in column 1 is less than zero, enter "0" in column 2 TOTAL **TOTAL** OR CLAIMS AS AMENDED - PART II OTHER THAN -02 SMALL ENTITY **SMALL ENTITY** OR (Column 1) (Column 3) (Column 2) CLAIMS HIGHEST ADDI-ADDI-REMAINING NUMBER PRESENT TIONAL RATE TIONAL RATE AFTER ENDMENT **PREVIOUSLY EXTRA** AMENDMENT FEE **PAID FOR** FEE €D Total Minus X\$ 9= X\$18= റ OR Independent Minus X39= X78= OR FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM +130= +260= OR TOTAL TOTAL OR ADDIT. FEE ADDIT, FEE 5-0 (Column 1) (Column 2) (Column 3) CLAIMS HIGHEST ADDI-ADDI-REMAINING NUMBER PRESENT **RATE** TIONAL TIONAL AMENDMENT **AFTER** PREVIOUSLY RATE EXTRA PAID FOR **AMENOMENT** FEE FEE **Total** Minus X\$ 9= X\$18= **OR** Independent Minus X39 =X78= OR FIRST PRESENTATION OF MULTIPLE DEPENDENT/CLAIM +260= +130= OR TOTAL ADDIT. FEE OR ADDIT. FEE 7-14-03 (Column 1) (Column 2) (Column 3) CLAIMS HIGHEST ADDI-ADDI-REMAINING NIMBER PRESENT ENT **AFTER PREVIOUSLY** RATE TIONAL RATE TIONAL **FXTRA** AMENDMENT PAID FOR FEE FEE Total Minus X\$ 9= X\$18= OR W Independent Minus X39= X78= OR FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM +130= +260= OR * If the entry in column 1 is less than the entry in column 2, write "0" in column 3. TOTAL * If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." OR ADDIT. FEE ADDIT, FEE "If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3." The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1. FORM PTO-875

Application or Docket Number